

Like too many of us, I bring with me to this work personal experiences surviving sexual violence. Being raped at age twenty jeopardized the trajectory of my life and nearly prevented me from graduating law school. It took years to try and shake the remnants of shame, humiliation, and pain that sexual assault inflicted. In my work at OCR, I've been deeply moved by talking and working with students and their advocates, hearing story after story of how their educations have been derailed and their lives imperiled by sexual violence. All students in our nation's schools have the right to feel safe and secure at school. All students should know that their school fosters an environment that decreases the risk that any student will suffer sexual harassment or assault. All students have a right to expect their school to respond promptly and fairly to incidents of sexual violence.

At OCR we are charged by Congress, among other things, with the critical responsibility for enforcing Title IX, which prohibits sex discrimination by any school receiving federal funds. It's our duty to enforce legal requirements concerning how a school must respond to incidents of sexual violence. OCR investigates and resolves complaints over how schools respond to sexual violence, resulting in changes to schools' policies and procedures to better ensure that schools provide the "prompt and equitable" response to sexual harassment and violence that federal regulations require. Our role as an enforcement agency is crucial. We can and will continue to fulfill that role.

OCR currently has 353 sexual violence cases open with colleges and universities, and 149 cases open with K through 12 school districts. Twenty-five percent of the higher education sexual violence complaints, and twenty-eight percent of the K through 12 cases resulted from complaints filed during the current Administration. We believe this continued influx of complaints reflects an improving culture where survivors feel supported coming forward both to their schools and to OCR. At the same time, the high number of sexual violence complaints shows that too many students are not yet experiencing school-level procedures that are prompt and equitable. The Department therefore recently issued interim guidance to encourage schools to ensure their procedures are both supportive to survivors and fair to all involved parties. The Department will undergo a transparent notice-and-comment rule-making process to solicit perspectives from all stakeholders to ensure that Title IX regulations result in school procedures that best serve Title IX's critical purpose.

It is helpful that this Task Force called this Roundtable together to discuss promoting healthy relationships in K through 12 schools. One of themes I hear over and over is that by the time many young people arrive at college, their approach to interpersonal relations and their basic understanding (or lack of understanding) of what it means to respect themselves and each other has already been formed throughout their K through 12 years. Waiting to address these interpersonal issues until college is problematic.

I am grateful for the opportunity to share with you the work being done at the Office for Civil Rights, and look forward to continuing this dialogue with this Task Force.

## RECOGNIZING THE 100TH ANNIVERSARY OF THE FAIRFAX COUNTY HEALTH DEPARTMENT

**HON. GERALD E. CONNOLLY**

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, October 31, 2017*

Mr. CONNOLLY. Mr. Speaker, I rise today to commemorate the 100th anniversary of the Fairfax County Health Department. Through a century of continuous service the department has distinguished itself as a national leader and a model public health department working to protect, promote and improve the quality of life for all its residents.

The origins of the Fairfax County Health Department can be traced back to April 1917, when the county launched a campaign for better health in the very same week that the United States would enter World War I. When the first public health physician and his successor were sent off to war, it left only one public health nurse to provide services for the entire county. Shortly after war's end the staff consisted of a full time health officer, one full time sanitation officer, one full time nurse and a part-time clerk, with funding provided by the Virginia State Health Department, the Fairfax County Board of Supervisors, the County Chapter of the Red Cross, the Tuberculosis Association, and donations from private citizens.

In the early years, the Health Department was primarily concerned with the spread of infectious diseases like diphtheria, smallpox, tuberculosis and typhoid fever. With better sanitation, education, and immunization practices, many of these threats began to wane and the department's services began to expand to accommodate the county's growing population.

With more facilities and staff, the department was able to offer maternal and child health clinics, home health care, speech and hearing, dental, and school health services. At the same time, a systematic program of environmental health was developed to include sewage disposal, protection of water supplies, fly and mosquito control, and general cleanliness of dwellings, tourist places and food establishments.

Due to its long history of financial and leadership support for public health, in 1995, Fairfax County sought and was granted the authority to operate its own health department by an act of the Virginia General Assembly. Since that change in legislative authority more than 20 years ago, the Fairfax County Health Department has become more efficient, effective, and responsive.

Throughout its history, the Health Department has been a leader in the prevention and control of communicable diseases. During the polio epidemic of the 1950s, Fairfax County participated in the Salk vaccine trials and became the first county in the United States to provide polio vaccine to its grade school children. In 1960s, it was the first department in the nation to participate in a mass measles vaccination trial program. And in 1989, when there was an outbreak of Ebola virus in monkeys at a laboratory in Reston, Virginia—an event dramatized in Richard Preston's book "The Hot Zone"—Fairfax County Health Department was once again on the front lines of an emerging disease threat.

While the emphasis on communicable disease control and prevention has not changed,

the Health Department has dedicated more of its resources to population-based health services that address disparities within its increasingly diverse community. The Health Department's Adult Day Health Care, Community Health Care Network, Skin Deep Tattoo Removal Program, HIV case management program, and Homeless Health Care program have been a model for other departments in Virginia and around the country.

Research on newer and better methods of onsite sewage disposal have often originated in Fairfax County. The department's laboratory is the largest local public health laboratory in the Commonwealth, performing more than 200,000 scientific tests annually.

Since the terrorist acts of September 11, 2001, the Health Department has assumed a first responder role with significant responsibility for a wide range of disaster planning and response activities. In response to lessons learned from the anthrax crisis, the Health Department organized a Medical Reserve Corps (MRC) unit, a cadre of trained volunteers, to augment surge capacity during public health emergencies. In the years since, the Health Department has activated its Incident Management Team and the MRC in response to natural disasters such as floods and hurricanes, H1N1 influenza pandemic, Ebola virus, Zika virus and other outbreak investigations.

The Fairfax County Health Department has achieved and sustained a well-earned reputation for excellence due in part to the dedication and compassion of its well-trained workforce, the quality and innovation of its programs and services, and the commitment of its leadership to continuous quality improvement. That commitment was demonstrated again in 2016 when the department achieved national accreditation by the Public Health Accreditation Board.

Mr. Speaker, I ask that my colleagues join me in recognizing the Fairfax County Health Department for a century of protecting, promoting and improving the health and quality of life for all in Fairfax County. Their selfless efforts, made on behalf of all citizens of our community are truly worthy of our highest praise.

## HONORING JON DOUGLAS RILEY

**HON. MIKE THOMPSON**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, October 31, 2017*

Mr. THOMPSON of California. Mr. Speaker, I rise to honor Mr. Jon Douglas Riley for his leadership and service to the people of Vallejo, California.

Mr. Riley was born at the Vallejo General Hospital on October 7, 1958. His parents, Jon Merton and Barbara Riley, raised him alongside his two sisters, Ronnette and Robin, at their house on Benson Avenue in Vallejo. His talent for recognizing and solving problems were evident in high school. As a student, he spoke in front of the Napa School Board and successfully argued for a smoking area to keep students from littering in the grass and creek. Mr. Riley graduated from Vintage High School in 1976.

From an early age, Mr. Riley dreamed of following his father and becoming a firefighter at the Vallejo Fire Department. He went